PTO/SB/22 (04-09)
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		displays a valid OMB control number
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)	
FY 2009	616562000800	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		
Application Number 10/596,862	Filed (Intl.	.) November 29, 2004
For METHOD FOR PLAYING GAMES USING BRAIN WAVES		
Art Unit 3714	Examiner	S. H. Lim
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<u>Fee</u>	Small Entity Fe	<u>e</u>
One month (37 CFR 1.17(a)(1)) \$130	\$65	\$
X Two months (37 CFR 1.17(a)(2)) \$490	\$245	\$245.00
Three months (37 CFR 1.17(a)(3)) \$1110	\$555	\$
Four months (37 CFR 1.17(a)(4)) \$1730	\$865	\$
Five months (37 CFR 1.17(a)(5)) \$2350	\$1175	\$
x Applicant claims small entity status. See 37 CFR 1.27.		
A check in the amount of the fee is enclosed.		
Payment by credit card. Form PTO-2038 is attached.		
The Director has already been authorized to charge fees in this application to a Deposit Account.		
X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to		
Deposit Account Number 03-1952		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the applicant/inventor.		
assignee of record of the entire interest. See 37 CFR 3.71.		
Statement under 37 CFR 3.73(b) is enclosed.	(Form PTO/SB/9	96).
attorney or agent of record. Registration Number	60,199	
attorney or agent under 37 CFR 1.34.		
Registration number if acting under 37 CFR 1.34		
/Brian B. Ho/ Signature	May 11, 2009 Date	
Brian B. Ho	415.268.7624	
Typed or printed name	Telephone Number	
NOTE: Signatures of all the inventors or assugnees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
X Total of forms are submitted.		